


| | | |
|---|--|---|
| Issue Classification  | Application/Control No. 10758053 | Applicant(s)/Patent Under Reexamination REYNOLDS ET AL. |
| | Examiner Jeffrey R West | Art Unit 2857 |

| ORIGINAL | | | | | | INTERNATIONAL CLASSIFICATION | | | | | | | | | | | | |
|---------------------------|--|----------|----|----|-----|------------------------------|---|---|---|----------------------|-------------|--|--|--|--|--|--|--|
| CLASS | | SUBCLASS | | | | CLAIMED | | | | | NON-CLAIMED | | | | | | | |
| 702 | | 69 | | | | G | C | 1 | R | 29 / 02 (2008.01.01) | | | | | | | | |
| CROSS REFERENCE(S) | | | | | | | | | | | | | | | | | | |
| CLASS | SUBCLASS (ONE SUBCLASS PER BLOCK) | | | | | | | | | | | | | | | | | |
| 702 | 66 | 79 | 81 | 84 | 179 | | | | | | | | | | | | | |
| 704 | 200 | | | | | | | | | | | | | | | | | |
| 370 | 516 | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | |

| <input type="checkbox"/> Claims renumbered in the same order as presented by applicant <input type="checkbox"/> CPA <input type="checkbox"/> T.D. <input type="checkbox"/> R.1.47 | | | | | | | | | | | | | | | |
|---|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|
| Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original |
| 1 | 1 | | | | | | | | | | | | | | |
| 2 | 2 | | | | | | | | | | | | | | |
| 4 | 3 | | | | | | | | | | | | | | |
| 3 | 4 | | | | | | | | | | | | | | |
| 5 | 5 | | | | | | | | | | | | | | |
| - | 6 | | | | | | | | | | | | | | |
| - | 7 | | | | | | | | | | | | | | |
| - | 8 | | | | | | | | | | | | | | |
| 6 | 9 | | | | | | | | | | | | | | |
| - | 10 | | | | | | | | | | | | | | |
| - | 11 | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |

| | | | |
|--|--|------------------------------|-------------------|
| NONE | | Total Claims Allowed: | |
| | | 6 | |
| (Assistant Examiner) | | (Date) | |
| /Jeffrey R. West/ Primary Examiner, Art Unit 2857 | | 12/10/2008 | |
| (Primary Examiner) | | (Date) | |
| | | O.G. Print Claim(s) | O.G. Print Figure |
| | | 1 | 8 |